

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Nursing (288)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions			
											PFT	PPT	NP	
FY2002-2003 Homeland Security														
Back to Basics for Public Health Nursing														
	Inc	450.0	383.5	22.5	20.0	14.0	10.0	0.0	0.0	0.0	6	0	0	
1004 Gen Fund	450.0													

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The Department requests an increment of \$450.0 GF to cover the cost of funding a portion of the remainder of the Public Health Nursing Back to Basics request that will assure that Public Health Nursing could launch an immediate and timely response to any disease threat to Alaskans, including any bioterrorism threat, to ensure their ability to protect Alaskans from infectious diseases and respond to a bioterrorism attack.

Thinking of disease control as an element of homeland security may be a new concept for some. However, recent national events tell us that diseases can be just as deadly as floods, earthquakes, fires and other disasters. Investing in a solid frontline public health workforce is a good defense for Alaska. Disease problems detected in legal immigrants, foreign crew on shipping vessels, and imported from our nearest international neighbors have been discovered and treated by public health nurses (PHNs) in their communities. PHNs not only respond to the disease outbreaks but also have been instrumental in helping communities organize for disasters and their consequences. PHNs participate on Local Emergency Planning Councils, respond when necessary to floods and fires, and in one community organized community providers to respond to the emotional fallout of the September 11 tragedies. It is all about being prepared. PHNs help Alaska be prepared to deal with bioterrorism or other disease threats, in your own community or across the state.

In FY02 the legislature funded one-third of Governor Knowles' request for the Back to Basics Infectious Disease Control Initiative. This request funds another one-third for Public Health Nursing. Two related increment requests will complete funding for Public Health Laboratories and Epidemiology. The Back to Basics Initiative is aimed at reinforcing Alaska's eroding public health system to prevent the spread of infectious disease. Promoting and protecting the public's health is a fundamental function of state government under the Alaska constitution. If Alaska is not the target for bioterrorism acts and there are no disasters other than the natural disasters we sometimes see, the good news is this investment in public health will pay dividends for Alaska's health for years to come.

Alaska has always relied on PHNs to provide basic public health care, especially to young children and pregnant women. In recent years, many old disease enemies like tuberculosis and measles, which were thought to be nearly wiped out, have re-emerged in our state, along with more recently identified diseases such chlamydia and hepatitis C. This year, unlike in years past, our PHN staff was on the frontline to respond to anthrax scares. If in the future there are scares of smallpox or some other biological weapon, PHNs will remain the primary foot soldiers in identifying and controlling the spread of these diseases in our state.

As the population of Alaska has grown over the years, the investment in public health nursing has not kept pace. In 1980, the capacity to meet the public health need was stretched with 86 public health nurses or 1 for every 4,881 Alaskans; in 2001 there are 114 PHNs or 1 for every 5,456 Alaskans. With the dollars provided last year the ratio was brought down to 1 PHN for every 5,226

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114 PHNs or 1 for every 5,456 Alaskans. With the dollars provided last year the ratio was brought down to 1 PHN for every 5,226 Alaskans, still a far from adequate number to do the work needed to protect Alaskans from the myriad of infectious diseases in our state. New outbreaks of tuberculosis requiring PHN management continue to occur throughout Alaska. When nurses are diverted to respond to large outbreaks they are restricted in providing such protective services as immunizations and well-baby screens, which then result in additional disease cases.

Other than bioterrorism threats, there are diseases that threaten the health of Alaskans everyday. Some such as tuberculosis (TB) have been with us for over half a century. When we think progress in control has been achieved, TB rises up again as a stubborn disease that must be dealt with through aggressive contact investigation and treatment. TB treatment and case detection is a time- and labor-intensive process, requiring many PHN hours in the field to find all those exposed and ensure adequate treatment. With the outbreak of 2000, a number of those active cases were in children who will require monitoring for many years to assure their TB infection does not reactivate.

Sexually transmitted diseases (STD) are an increasing concern in Alaska. In this state chlamydia, gonorrhea and infectious syphilis are mandatory reportable conditions. In 2000, the number of reported STD cases was 2,932, and the average number of sexual partners increased to 2.1 per case. Over the two years, about two-thirds of the named partners subsequently were tested for STDs and 778 cases of STD infection were found that otherwise might not have been identified. The follow-up of each STD case includes ensuring proper treatment, confidential notification of the partners of their exposure and follow-up counseling, testing and treatment of the partners. It is a labor-intensive process that can only be carried out by public health staff. A shortage of public health nurses to do this work, particularly in rural Alaska, leads infected individuals to remain unidentified and untreated, potentially exposing an ever-increasing number of individuals and perpetuating a cycle of infection and re-infection.

A new vaccination schedule for children has greatly increased the demands on the public health nursing system all through 2001 and will require an increased level of effort over time to maintain full immunization, as children are born in or move to the state. In 1980, every child needed 8 doses of vaccine to be fully immunized; thus the 110,420 children, ages birth through 19 years of age, needed 883,000 doses of vaccine to be administered. In 2001, every child needs 21 doses of vaccine to be fully immunized; thus the 211,261 children through 19 years of age will need 4.5 million vaccinations to meet the new schedule. Nearly twice as many children now need over five times as many doses of vaccine. There are only 32 more nurses today to deliver these vaccines across Alaska than there were in 1980 when the recommended immunization schedule was comprised of fewer vaccines and doses.

The appearance of anthrax contaminated letters and the associated illness and death have made bioterrorism a part of the public health arena. With inadequate capacity to manage existing disease loads, there is definitely no capacity to deal with this emerging

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issue.

To deal with these issues, the Division of Public Health is requesting for Public Health Nursing an FY03 increment in the following line items:

Personal Services \$383.5

Public health nurses continue to be needed in various locations across the state to meet the rising demands of infectious disease control, intervention and treatment for Alaskans. PHNs provide direct services to Alaskans in their communities. Six to seven nurses or nurse aides would be placed in such areas as St. Mary's, Dillingham, Valdez, Wasilla, Seward and the Bethel area, although final

placement of these positions may be influenced by outbreaks or disease loads unknown today. Considerations for staffing in locations important to the state's security have been made. Nurse aides are especially needed to ensure that directly observed therapy for TB is available to newly diagnosed patients.

Travel \$22.5

Travel dollars are needed to mobilize staff to a location needing additional support and for itinerant nurses to reach patients in remote villages and communities to provide screening, testing, exams, treatment, etc. and to carry out contact notification, tracing, education and follow-up.

Contractual \$20.0

Additional specimen shipping costs for possible biological agents and specialized training for infectious and communicable diseases such as TB and STDs require additional dollars. This money also provides for public notices and small amounts of printing.

Supplies \$14.0

Medications for patients with sexually transmitted diseases, patient education materials, and clinic exam materials such as swabs, paper products (gowns and cover sheets), specimen containers and blood drawing supplies are needed. Also, safer needles and needleless technology is needed to comply with SB 261 and OSHA to prevent needle stick exposures to diseases.

Equipment \$10.0

Clinic equipment such as hemacues, otoscopes, biojector devices, blood pressure cuffs, and stethoscopes, and exam lights are needed for physical exams.

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Funding of the increment will ensure capacity at the local level to respond to concerns and issues related to the threat of bioterrorism and to an actual event.

Bioterrorism - Nursing

	Inc	134.0	114.0	20.0	0.0	0.0	0.0	0.0	0.0	0.0	2	0	0
1004 Gen Fund	134.0												

It is essential that our frontline public health workers be trained for immediate response for any bioterrorism event or threat. Not only must they operate with a high index of suspicion when unusual illness events or illness clusters occur, the frontline staff must be ready to take action quickly. As we saw with the recent rash of anthrax scares, the public health nurses (PHNs) were called on to deal with obtaining nasal cultures where appropriate, for quelling the fears of those potentially exposed, and for being ready within a short time to respond to these concerns.

This request will provide a bioterrorism coordinator/trainer and one clerk for the statewide PHN staff to ensure that the work of the Section of Nursing is well coordinated with other departments of the state, local and federal agencies and that an effective plan is developed and maintained for the PHNs' response to bioterrorism threats. This request will ensure that local staff are continually updated and trained so their response is timely and appropriate in the event of a bioterrorism event or threat. These two positions will assure that training is carried out and updated instructions and guidance are distributed to all frontline public health nursing staff. The bioterrorism coordinator will assure that appropriate data is collected and transmitted to the Statewide Emergency Coordinating Center. This coordinator, in consultation with the Chief of PHN, will be able to activate or mobilize the frontline PHN staff as needed for an immediate and appropriate response. The clerk will provide essential support for training scheduling, sending out materials, and assisting in posting information at the direction of the PHN Coordinator on our statewide communications systems. These two positions will understand the PHN service delivery system and be able to offer and organize the PHN staff's frontline support in the event of a bioterrorism event or threat.

This request also included \$20.0 for travel to get training and to train local public health nurses and their staff on bioterrorism and the PHN role in responding. Both personal services and travel costs are for FY03.

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											PFT	PPT	NP
FY2002-2003 Homeland Security													
Homeland Public Health Nursing Computer Support													
	Inc	150.2	141.3	0.0	2.9	0.0	6.0	0.0	0.0	0.0	2	0	0
1004 Gen Fund	150.2												

These individuals are necessary to provide adequate computer support for the public health nursing centers for troubleshooting and maintenance of computers and electronic communication systems in the state. Sustaining secure, reliable communication systems is essential for managing disasters and bioterrorism events as well as the more routine disease outbreaks and public health concerns at the community and village level. Current technical support is inadequate to maintain Nursing's hardware and software related to essential communication and service.

These two microcomputer technicians will work closely with the Public Health Alert Network and will keep public health centers functional on First Class, the statewide computer system used for emergency management by the State Emergency Coordination Center (DMVA). The two microcomputer technicians will be based in Anchorage. The personal services funding is based on four months in FY02 (\$35.2) and full year funding in FY03 (\$106.1). Contractual services to support the positions and equipment funding for computers and office furniture will be needed in FY03.

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											PFT	PPT	NP
FY2002-2003 Homeland Security Amended													
AMD: Homeland Public Health Nursing Computer Support													
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	150.2												
1004 Gen Fund	-150.2												

Since submittal of the Homeland Security budget request, the Division of Public Health has been notified of Public Health Bioterrorism Preparedness and Response Funds which are available from the Federal Government. This transaction switches the increment request from General Funds to Federal Funds.

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											PFT	PPT	NP
FY2002-2003 Homeland Security Amended													
AMD: Bioterrorism - Nursing													
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	134.0												
1004 Gen Fund	-134.0												

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FY2002-2003 Homeland Security Amended														
AMD: Back to Basics for Public Health Nursing														
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
1002 Fed Rcpts	450.0													
1004 Gen Fund	-450.0													

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Other than bioterrorism threats, there are diseases that threaten the health of Alaskans everyday. Some such as tuberculosis (TB) have been with us for over half a century. When we think progress in control has been achieved, TB rises up again as a stubborn disease that must be dealt with through aggressive contact investigation and treatment. TB treatment and case detection is a time- and labor-intensive process, requiring many PHN hours in the field to find all those exposed and ensure adequate treatment. With the outbreak of 2000, a number of those active cases were in children who will require monitoring for many years to assure their TB infection does not reactivate.

Sexually transmitted diseases (STD) are an increasing concern in Alaska. In this state chlamydia, gonorrhea and infectious syphilis are mandatory reportable conditions. In 2000, the number of reported STD cases was 2,932, and the average number of sexual partners increased to 2.1 per case. Over the two years, about two-thirds of the named partners subsequently were tested for STDs and 778 cases of STD infection were found that otherwise might not have been identified. The follow-up of each STD case includes ensuring proper treatment, confidential notification of the partners of their exposure and follow-up counseling, testing and treatment of the partners. It is a labor-intensive process that can only be carried out by public health staff. A shortage of public health nurses to do this work, particularly in rural Alaska, leads infected individuals to remain unidentified and untreated, potentially exposing an ever-increasing number of individuals and perpetuating a cycle of infection and re-infection.

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Alaska than there were in 1980 when the recommended immunization schedule was comprised of fewer vaccines and doses.

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To deal with these issues, the Division of Public Health is requesting for Public Health Nursing an FY03 increment in the following line items:

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placement of these positions may be influenced by outbreaks or disease loads unknown today. Considerations for staffing in locations important to the state's security have been made. Nurse aides are especially needed to ensure that directly observed therapy for TB is available to newly diagnosed patients.

Travel \$22.5

Travel dollars are needed to mobilize staff to a location needing additional support and for itinerant nurses to reach patients in remote villages and communities to provide screening, testing, exams, treatment, etc. and to carry out contact notification, tracing, education and follow-up.

Contractual \$20.0

Additional specimen shipping costs for possible biological agents and specialized training for infectious and communicable diseases such as TB and STDs require additional dollars. This money also provides for public notices and small amounts of printing.

Supplies \$14.0

Medications for patients with sexually transmitted diseases, patient education materials, and clinic exam materials such as swabs, paper products (gowns and cover sheets), specimen containers and blood drawing supplies are needed. Also, safer needles and needleless technology is needed to comply with SB 261 and OSHA to prevent needle stick exposures to diseases.

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											PFT	PPT	NP

Additional technology is needed to comply with CDC and DHS to prevent future outbreaks of disease.

Equipment \$10.0
Clinic equipment such as hemacues, otoscopes, biojector devices, blood pressure cuffs, and stethoscopes, and exam lights are needed for physical exams.

Funding of the increment will ensure capacity at the local level to respond to concerns and issues related to the threat of bioterrorism and to an actual event.

Totals		734.2	638.8	42.5	22.9	14.0	16.0	0.0	0.0	0.0	10	0	0
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Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Epidemiology (296)

BRU: State Health Services (96)

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											PFT	PPT	NP	
FY2002-2003 Homeland Security														
Back to Basics in Epidemiology														
	Inc	450.0	366.0	50.0	34.0	0.0	0.0	0.0	0.0	0.0	4	0	0	
1004 Gen Fund	450.0													

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Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Epidemiology (296)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

The Department requests an increment of \$450.0 to complete funding of the Back to Basics Initiative that supports epidemiology staff in carrying out more comprehensive infectious disease prevention and control work to protect the public's health.

The resources provided last year were essential and immediately put to work. But in spite of increased effects, Alaska had the highest rate of tuberculosis in the nation and the largest rate increase in the nation last year. We do not yet have the capacity to meet day-to-day needs to control tuberculosis, STD, HIV, and other infectious diseases.

This request is of even greater importance since September 11, 2001, because the skills and capacity needed to combat usual infectious diseases are essential to combat a terrorism attack using an infectious agent. Should such an attack occur, we must have an adequate number of trained staff and a fully functioning public health system to have any hope in minimizing illness and death.

Additional epidemiology staff are needed to provide the medical and other clinical oversight and direction that physicians and nurses providing care directly to patients need to identify, manage and control disease outbreaks, to provide partner and contact interviewing to identify persons unknowingly exposed and to assure their treatment. Epidemiology staff also need to conduct the studies and other work needed to determine effective control measures and the extent of disease in the state, and to collect and analyze data on the occurrence and location of the various infectious diseases. It is likely that a covert bioterrorist attack would be identified by staff as they collect disease reports from providers and identify trends or clusters.

Tuberculosis is likely the most visible of public health challenges. In 1946, 43% of all death certificates of Alaska Natives listed tuberculosis as the cause of death. Once thought to be nearly eliminated, TB is resurfacing with a vengeance. The threat of developing treatment resistant strains requires all public health staff to be vigilant and diligent. Epidemiology staff play many roles in a TB outbreak. They provide medical consultation to doctors and public health nurses, collect and analyze data to determine the magnitude and extent of the problem and possible intervention options and, when necessary, provide direct service. This is the same type of involvement staff would have in assisting private providers in managing the illness related to a biological agent. In most states and cities there are special TB clinics. Due to the huge geographic area in Alaska, the only option is to provide the more labor-intensive work of supporting individual doctors and PHNs in managing the disease wherever the TB patient lives. TB can remain dormant for years and surface years later. This means that the populations where TB is known to exist must be monitored for years to come. Therefore, the problem will not diminish in the near future.

Sexually transmitted diseases (STD) such as chlamydia are an increasing concern in Alaska. An epidemic of pelvic inflammatory disease (PID), a disease that often leads to infertility in women, was discovered in Alaska as a result of a study done by

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Component: Epidemiology (296)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

disease (PID), a disease that often leads to infertility in women, was discovered in Alaska as a result of a study done by epidemiology staff. Screening exposed the fact that there are large numbers of undiagnosed and untreated cases of chlamydia in women in our state. Many are being rendered infertile as a result.

The highest public health priority for HIV/AIDS is to prevent new infections. To achieve this goal, highly trained public health professional staff attempt to interview every HIV positive person in Alaska to enlist their voluntary cooperation in identifying contacts who might be at risk of infection. In 1999, intensive partner notification activities working with 9 original patients resulted in identifying a total of 78 sexual and/or injecting contacts. Of these 78 contacts, 67 were notified and tested, and 6 newly infected individuals were found. With additional resources and professional staff, all HIV infected individuals will be offered voluntary assistance at identifying partners and contacts at risk.

A new vaccination schedule for children has greatly increased the workload in the Section of Epidemiology. In 1980, 883,000 doses of vaccine needed to be ordered, stored and distributed. In 2000, more than 4.5 million doses of vaccine were handled. Additionally epidemiology staff provide the education and training needed to ensure the vaccines are handled properly and used by providers in a timely manner. Data must be collected and analyzed regarding the immunization rates by community and provider, so maximum immunization rates are achieved and maintained over time. Provider and consumer education and information must be continually updated and distributed. Medical consultation on potential risks and appropriate use must always be available.

Alaskans and tourists are vulnerable to air, water and food borne illnesses. Major outbreaks of influenza have erupted during the summer tourist season in each of the past three years. This threatens our tourism industry and Alaskans individually. When an outbreak occurs, epidemiology staff must respond immediately. They manage the overall effort and conduct the necessary investigations and follow-up needed to discern the cause of the outbreak and the number of persons involved. They also ensure that everyone potentially exposed is contacted and receives appropriate information. They then collect all relevant data, prepare reports, and initiate efforts to prevent a recurrence. When the problem occurs on a cruise ship or in a group of travelers between Canada and Alaska, epidemiology staff are responsible for coordinating all work with the Centers for Disease Control and the governments of Canada.

To do this essential work to protect Alaskans from infectious diseases and to ensure the additional capacity that would be essential in the event of a bioterrorist event, the Division of Public Health requests the following FY03 funding for Epidemiology:

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Epidemiology (296)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

Personal Services - \$366.0

This funding will support three nurse epidemiologists who will undertake, conduct, manage and evaluate field work to control infectious disease through intensive case management, screening, investigation and partner notification. A new analyst/programmer position will oversee and supervise our information technology team which will support electronic disease surveillance and monitoring, ensuring disease reports are more timely thus increasing the ability of the state to detect a bioterrorist act.

Travel - \$ 50.0

These funds will pay for travel to villages to provide training, technical assistance and support to field workers.

Contractual -\$34.0

This funding will provide testing materials, contractual support for radiology services and training materials.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Epidemiology (296)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions			
											PFT	PPT	NP	
FY2002-2003 Homeland Security														
Bioterrorism - Epidemiology														
	Inc	258.0	227.7	30.3	0.0	0.0	0.0	0.0	0.0	0.0	2	0	0	
1004 Gen Fund	258.0													

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Epidemiology (296)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

Because of recent incidents with anthrax, the horrific and previously unthinkable threat of biological warfare has become a reality and an everyday threat to the public health. As the State of Alaska agencies and departments have mobilized to respond to bioterrorism events, limitations in capacity of the State public health system have been revealed. These limitations in capacity were identified by the Department and addressed in the Back to Basics Initiative that was partially funded by the legislature in the last session. The Department requests additional funding to rebuild essential capacity and expertise since the demands on the public health system have been overwhelming.

Consistently, more Americans are being identified as having been exposed to anthrax as a result of intentional criminal acts. Numerous suspicious circumstances have required investigation and, in many cases, collection of materials for laboratory analysis. As experience has been gained, State health departments and the Centers for Disease Control have been developing information for the public, policy makers, physicians, and first responders. Because there is no past national experience to draw upon to guide efforts, responding has been extremely stressful and time-consuming. Providing accurate daily information has taxed the State surveillance system. Providing appropriate instructions for specimen handling and shipment has been a difficult task. Developing advice for Alaska's medical providers has challenged the State public health medical staff. Developing accurate information to guide the State public health response has revealed limitations due to inadequate capacity.

Our experience has served to educate all State, federal and local responders by showing us where we remain vulnerable and what needs attention to improve our ability to protect Alaska.

We are requesting the following FY03 increment for surveillance, field investigation and training :

We request funding to support one full-time medical epidemiologist and one nurse epidemiologist who would become clinically and epidemiologically expert in both bioterrorism and chemical terrorism. This expertise will be essential to guide response in the event of an attack in the future and will enhance existing disease management and control efforts. We are also requesting \$30.3 for staff travel to get training specific to bioterrorism and then provide training in the field for local health providers, public safety personnel, and others.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Epidemiology (296)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

FY2002-2003 Homeland Security

Public Health Pharmacist

	Inc	104.8	97.8	0.0	3.0	1.0	3.0	0.0	0.0	0.0	1	0	0
1004 Gen Fund	104.8												

This increment will allow us to fund a full-time pharmacist. This position would be responsible for the division pharmacy that would handle all drugs used by public health on a routine basis (e.g. immunizations, tuberculosis medications) as well as antibiotics and necessary oversight of all aspects of drug acceptance, distribution, etc, related to response to a bioterrorism attack.

The total requested is for FY03.

Medical Crisis Action Team (MCAT)

	Inc	30.0	0.0	0.0	30.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	30.0												

In the event of a weapon of mass destruction attack, especially a bioterrorism event, we would need additional physician capacity to manage the clinical part of any response. Additionally, the contracted physicians can assist the Division in training, drills, etc. to prepare for such an event. This funding is requested for FY03.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Epidemiology (296)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP
FY2002-2003 Homeland Security Amended													
AMD: Medical Crisis Action Team (MCAT)													
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	30.0												
1004 Gen Fund	-30.0												

Since submittal of the Homeland Security budget request, the Division of Public Health has been notified of Public Health Bioterrorism Preparedness and Response Funds which are available from the Federal Government. This transaction switches the increment request from General Funds to Federal Funds.

In the event of a weapon of mass destruction attack, especially a bioterrorism event, we would need additional physician capacity to manage the clinical part of any response. Additionally, the contracted physicians can assist the Division in training, drills, etc. to prepare for such an event. This funding is requested for FY03.

AMD: Public Health Pharmacist

	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	104.8												
1004 Gen Fund	-104.8												

Since submittal of the Homeland Security budget request, the Division of Public Health has been notified of Public Health Bioterrorism Preparedness and Response Funds which are available from the Federal Government. This transaction switches the increment request from General Funds to Federal Funds.

This increment will allow us to fund a full-time pharmacist. This position would be responsible for the division pharmacy that would handle all drugs used by public health on a routine basis (e.g. immunizations, tuberculosis medications) as well as antibiotics and necessary oversight of all aspects of drug acceptance, distribution, etc, related to response to a bioterrorism attack.

The total requested is for FY03.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Epidemiology (296)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP
FY2002-2003 Homeland Security Amended													
AMD: Bioterrorism - Epidemiology													
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	258.0												
1004 Gen Fund	-258.0												

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Epidemiology (296)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

Since submittal of the Homeland Security budget request, the Division of Public Health has been notified of Public Health Bioterrorism Preparedness and Response Funds which are available from the Federal Government. This transaction switches the increment request from General Funds to Federal Funds.

Because of recent incidents with anthrax, the horrific and previously unthinkable threat of biological warfare has become a reality and an everyday threat to the public health. As the State of Alaska agencies and departments have mobilized to respond to bioterrorism events, limitations in capacity of the State public health system have been revealed. These limitations in capacity were identified by the Department and addressed in the Back to Basics Initiative that was partially funded by the legislature in the last session. The Department requests additional funding to rebuild essential capacity and expertise since the demands on the public health system have been overwhelming.

Consistently, more Americans are being identified as having been exposed to anthrax as a result of intentional criminal acts. Numerous suspicious circumstances have required investigation and, in many cases, collection of materials for laboratory analysis. As experience has been gained, State health departments and the Centers for Disease Control have been developing information for the public, policy makers, physicians, and first responders. Because there is no past national experience to draw upon to guide efforts, responding has been extremely stressful and time-consuming. Providing accurate daily information has taxed the State surveillance system. Providing appropriate instructions for specimen handling and shipment has been a difficult task. Developing advice for Alaska's medical providers has challenged the State public health medical staff. Developing accurate information to guide the State public health response has revealed limitations due to inadequate capacity.

Our experience has served to educate all State, federal and local responders by showing us where we remain vulnerable and what needs attention to improve our ability to protect Alaska.

We are requesting the following FY03 increment for surveillance, field investigation and training :

We request funding to support one full-time medical epidemiologist and one nurse epidemiologist who would become clinically and epidemiologically expert in both bioterrorism and chemical terrorism. This expertise will be essential to guide response in the event of an attack in the future and will enhance existing disease management and control efforts. We are also requesting \$30.3 for staff travel to get training specific to bioterrorism and then provide training in the field for local health providers, public safety personnel, and others.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Epidemiology (296)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Epidemiology (296)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP
FY2002-2003 Homeland Security Amended													
AMD: Back to Basics in Epidemiology													
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	450.0												
1004 Gen Fund	-450.0												

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Epidemiology (296)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

Since submittal of the Homeland Security budget request, the Division of Public Health has been notified of Public Health Bioterrorism Preparedness and Response Funds which are available from the Federal Government. This transaction switches the increment request from General Funds to Federal Funds.

The Department requests an increment of \$450.0 to complete funding of the Back to Basics Initiative that supports epidemiology staff in carrying out more comprehensive infectious disease prevention and control work to protect the public's health.

The resources provided last year were essential and immediately put to work. But in spite of increased effects, Alaska had the highest rate of tuberculosis in the nation and the largest rate increase in the nation last year. We do not yet have the capacity to meet day-to-day needs to control tuberculosis, STD, HIV, and other infectious diseases.

This request is of even greater importance since September 11, 2001, because the skills and capacity needed to combat usual infectious diseases are essential to combat a terrorism attack using an infectious agent. Should such an attack occur, we must have an adequate number of trained staff and a fully functioning public health system to have any hope in minimizing illness and death.

Additional epidemiology staff are needed to provide the medical and other clinical oversight and direction that physicians and nurses providing care directly to patients need to identify, manage and control disease outbreaks, to provide partner and contact interviewing to identify persons unknowingly exposed and to assure their treatment. Epidemiology staff also need to conduct the studies and other work needed to determine effective control measures and the extent of disease in the state, and to collect and analyze data on the occurrence and location of the various infectious diseases. It is likely that a covert bioterrorist attack would be identified by staff as they collect disease reports from providers and identify trends or clusters.

Tuberculosis is likely the most visible of public health challenges. In 1946, 43% of all death certificates of Alaska Natives listed tuberculosis as the cause of death. Once thought to be nearly eliminated, TB is resurfacing with a vengeance. The threat of developing treatment resistant strains requires all public health staff to be vigilant and diligent. Epidemiology staff play many roles in a TB outbreak. They provide medical consultation to doctors and public health nurses, collect and analyze data to determine the magnitude and extent of the problem and possible intervention options and, when necessary, provide direct service. This is the same type of involvement staff would have in assisting private providers in managing the illness related to a biological agent. In most states and cities there are special TB clinics. Due to the huge geographic area in Alaska, the only option is to provide the more labor-intensive work of supporting individual doctors and PHNs in managing the disease wherever the TB patient lives. TB can remain dormant for years and surface years later. This means that the populations where TB is known to exist must be monitored

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Epidemiology (296)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

remain dormant for years and surface years later. This means that the populations where TB is known to exist must be monitored for years to come. Therefore, the problem will not diminish in the near future.

Sexually transmitted diseases (STD) such as chlamydia are an increasing concern in Alaska. An epidemic of pelvic inflammatory disease (PID), a disease that often leads to infertility in women, was discovered in Alaska as a result of a study done by epidemiology staff. Screening exposed the fact that there are large numbers of undiagnosed and untreated cases of chlamydia in women in our state. Many are being rendered infertile as a result.

The highest public health priority for HIV/AIDS is to prevent new infections. To achieve this goal, highly trained public health professional staff attempt to interview every HIV positive person in Alaska to enlist their voluntary cooperation in identifying contacts who might be at risk of infection. In 1999, intensive partner notification activities working with 9 original patients resulted in identifying a total of 78 sexual and/or injecting contacts. Of these 78 contacts, 67 were notified and tested, and 6 newly infected individuals were found. With additional resources and professional staff, all HIV infected individuals will be offered voluntary assistance at identifying partners and contacts at risk.

A new vaccination schedule for children has greatly increased the workload in the Section of Epidemiology. In 1980, 883,000 doses of vaccine needed to be ordered, stored and distributed. In 2000, more than 4.5 million doses of vaccine were handled. Additionally epidemiology staff provide the education and training needed to ensure the vaccines are handled properly and used by providers in a timely manner. Data must be collected and analyzed regarding the immunization rates by community and provider, so maximum immunization rates are achieved and maintained over time. Provider and consumer education and information must be continually updated and distributed. Medical consultation on potential risks and appropriate use must always be available.

Alaskans and tourists are vulnerable to air, water and food borne illnesses. Major outbreaks of influenza have erupted during the summer tourist season in each of the past three years. This threatens our tourism industry and Alaskans individually. When an outbreak occurs, epidemiology staff must respond immediately. They manage the overall effort and conduct the necessary investigations and follow-up needed to discern the cause of the outbreak and the number of persons involved. They also ensure that everyone potentially exposed is contacted and receives appropriate information. They then collect all relevant data, prepare reports, and initiate efforts to prevent a recurrence. When the problem occurs on a cruise ship or in a group of travelers between Canada and Alaska, epidemiology staff are responsible for coordinating all work with the Centers for Disease Control and the governments of Canada.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Epidemiology (296)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

To do this essential work to protect Alaskans from infectious diseases and to ensure the additional capacity that would be essential in the event of a bioterrorist event, the Division of Public Health requests the following FY03 funding for Epidemiology:

Personal Services - \$366.0

This funding will support three nurse epidemiologists who will undertake, conduct, manage and evaluate field work to control infectious disease through intensive case management, screening, investigation and partner notification. A new analyst/programmer position will oversee and supervise our information technology team which will support electronic disease surveillance and monitoring, ensuring disease reports are more timely thus increasing the ability of the state to detect a bioterrorist act.

Travel - \$ 50.0

These funds will pay for travel to villages to provide training, technical assistance and support to field workers.

Contractual -\$34.0

This funding will provide testing materials, contractual support for radiology services and training materials.

Totals	842.8	691.5	80.3	67.0	1.0	3.0	0.0	0.0	0.0	7	0	0
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Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Community Health/Emergency Medical Services (2078)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP
FY2002-2003 Homeland Security													
Disaster Communications Technical Support													
	Inc	157.5	140.5	3.0	8.0	1.0	5.0	0.0	0.0	0.0	2	0	0
1004 Gen Fund	157.5												

These funds will support two positions, an Analyst Programmer IV and a Data Entry Clerk, which will support the Health Alert Network (HAN) system, a system responsible for rapid electronic communications among agencies responsible for responding to disasters and public health emergencies. The request includes personal services funding for four months in FY02 (\$34.9) and 12 months in FY03 (\$105.6).

The Analyst Programmer will: (1) complete, maintain, and troubleshoot the database containing contact information to alert, notify, or query personnel or facilities in the event of a disaster or emergency (e.g., healthcare providers, emergency medical services providers, health and public safety facilities, law enforcement, laboratory staff, military, veterinarians, state and local leadership, etc.); (2) develop a system to collect data on the timeliness and effectiveness of a health alert message; (3) maintain, troubleshoot and upgrade the hardware and software necessary for the HAN system; (4) establish written protocols for when and how to use the HAN system; (5) maintain contacts with the micro-computer technicians that provide technical support for the public health centers to ensure equipment is operational; and (6) provide frequent status updates to the Bioterrorism Interagency Operations Team, a team responsible for overseeing the Division of Public Health's preparedness and response to acts of bioterrorism.

The Data Entry Clerk will maintain contact and facility information for the HAN database, assuring it is accurate, complete, and current.

Travel funds will include the cost of travel of the Analyst Programmer between the Juneau and Anchorage offices to provide program support. Contractual services funds will include the cost of rent for the two positions and necessary support. Supplies funds will be for the purchase of general office consumables. Equipment funds will be for the purchase of computers and installed software.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Community Health/Emergency Medical Services (2078)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions			
											PFT	PPT	NP	
FY2002-2003 Homeland Security														
Disaster Communication Specialist														
	Inc	111.0	98.0	4.0	5.0	1.0	3.0	0.0	0.0	0.0	1	0	0	
1004 Gen Fund	111.0													

This planner will be responsible for overseeing a coordinated telecommunications infrastructure linking communications between the public health system and the agencies responsible for responding to disasters and other public health emergencies. The personal services funding is for four months in FY02 (\$23.9) and 12 months in FY03 (\$74.1). The other line funding is for FY03.

This position will: (1) use existing data and information to determine what types of communications technologies exist, identify gaps, and develop a plan to address those gaps; (2) develop partnerships with other agencies highly dependent upon telecommunications systems (e.g., Alaska Federal Health Care Access Network, Alaska State Medical Association, the University system, and State agencies such as the Alaska Division of Emergency Services); (3) address technical issues with different communications operating systems; (4) identify and provide training as communications technologies change; (5) develop a long-range plan for needed communications technologies in the state; and (6) evaluate the telecommunications system in responsiveness, reliability, and usefulness.

Travel funds for this increment will be used for the planner to meet with other agencies highly dependent upon telecommunication systems, provide training as technology communications change, and attend one national telecommunications meeting. Contractual services funds will be used for rent costs and necessary support. Supplies funds are for general office consumables. Equipment funds are for a computer and installed software.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Community Health/Emergency Medical Services (2078)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP
FY2002-2003 Homeland Security Amended													
AMD: Disaster Communication Specialist													
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	111.0												
1004 Gen Fund	-111.0												

Since submittal of the Homeland Security budget request, the Division of Public Health has been notified of Public Health Bioterrorism Preparedness and Response Funds which are available from the Federal Government. This transaction switches the increment request from General Funds to Federal Funds.

This planner will be responsible for overseeing a coordinated telecommunications infrastructure linking communications between the public health system and the agencies responsible for responding to disasters and other public health emergencies. The personal services funding is for four months in FY02 (\$23.9) and 12 months in FY03 (\$74.1). The other line funding is for FY03.

This position will: (1) use existing data and information to determine what types of communications technologies exist, identify gaps, and develop a plan to address those gaps; (2) develop partnerships with other agencies highly dependent upon telecommunications systems (e.g., Alaska Federal Health Care Access Network, Alaska State Medical Association, the University system, and State agencies such as the Alaska Division of Emergency Services); (3) address technical issues with different communications operating systems; (4) identify and provide training as communications technologies change; (5) develop a long-range plan for needed communications technologies in the state; and (6) evaluate the telecommunications system in responsiveness, reliability, and usefulness.

Travel funds for this increment will be used for the planner to meet with other agencies highly dependent upon telecommunication systems, provide training as technology communications change, and attend one national telecommunications meeting. Contractual services funds will be used for rent costs and necessary support. Supplies funds are for general office consumables. Equipment funds are for a computer and installed software.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Community Health/Emergency Medical Services (2078)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans	Totals	Personal	Travel	Contractual	Supplies	Equipment	Land/	Grants	Misc.	Positions		
	Type		Services					Buildings	Claims		PFT	PPT	NP
FY2002-2003 Homeland Security Amended													
AMD: Disaster Communications Technical Support													
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	157.5												
1004 Gen Fund	-157.5												

Since submittal of the Homeland Security budget request, the Division of Public Health has been notified of Public Health Bioterrorism Preparedness and Response Funds which are available from the Federal Government. This transaction switches the increment request from General Funds to Federal Funds.

These funds will support two positions, an Analyst Programmer IV and a Data Entry Clerk, which will support the Health Alert Network (HAN) system, a system responsible for rapid electronic communications among agencies responsible for responding to disasters and public health emergencies. The request includes personal services funding for four months in FY02 (\$34.9) and 12 months in FY03 (\$105.6).

The Analyst Programmer will: (1) complete, maintain, and troubleshoot the database containing contact information to alert, notify, or query personnel or facilities in the event of a disaster or emergency (e.g., healthcare providers, emergency medical services providers, health and public safety facilities, law enforcement, laboratory staff, military, veterinarians, state and local leadership, etc.); (2) develop a system to collect data on the timeliness and effectiveness of a health alert message; (3) maintain, troubleshoot and upgrade the hardware and software necessary for the HAN system; (4) establish written protocols for when and how to use the HAN system; (5) maintain contacts with the micro-computer technicians that provide technical support for the public health centers to ensure equipment is operational; and (6) provide frequent status updates to the Bioterrorism Interagency Operations Team, a team responsible for overseeing the Division of Public Health's preparedness and response to acts of bioterrorism.

The Data Entry Clerk will maintain contact and facility information for the HAN database, assuring it is accurate, complete, and current.

Travel funds will include the cost of travel of the Analyst Programmer between the Juneau and Anchorage offices to provide program support. Contractual services funds will include the cost of rent for the two positions and necessary support. Supplies funds will be for the purchase of general office consumables. Equipment funds will be for the purchase of computers and installed software.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Community Health/Emergency Medical Services (2078)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP
Totals		268.5	238.5	7.0	13.0	2.0	8.0	0.0	0.0	0.0	3	0	0

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Emergency Medical Services Grants (2309)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions			
											PFT	PPT	NP	
FY2002-2003 Homeland Security														
Regional EMS Grantee Training Upgrade														
	Inc	330.0	0.0	0.0	0.0	0.0	0.0	0.0	330.0	0.0	0	0	0	
1004 Gen Fund	330.0													
With the increasing threat to Alaska's citizens from terroristic acts, front-line public safety and Emergency Medical Services (EMS) personnel have increasing responsibility and increasing risk. In cases of mass casualties and individual exposure to biologic and toxic agents, public safety and EMS personnel are often the first to respond. The need for special training, technical assistance, and coordination is greater than ever before.														
The Department requests an FY03 increment to assist the regional EMS grantees to provide this necessary special training; provide technical assistance to public safety and EMS agencies in the areas of bioterrorism response, mass casualty response, and responder safety; and coordinate interagency response to bioterrorism acts and other acts of mass destruction.														
Totals		330.0	0.0	0.0	0.0	0.0	0.0	0.0	330.0	0.0	0	0	0	

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Public Health Laboratories (2252)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions			
											PFT	PPT	NP	
FY2002-2003 Homeland Security														
Back to Basics for Public Health Laboratory														
	Inc	240.0	67.0	3.0	140.0	30.0	0.0	0.0	0.0	0.0	1	0	0	
1004 Gen Fund	240.0													

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Public Health Laboratories (2252)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

The Department requests an FY03 increment to fund the remainder of the Back to Basics Initiative for the public health laboratories to ensure the lab has the staff, equipment and contractual funds needed to carry out their infectious disease work.

In FY02 the legislature funded one-third of Governor Knowles' request for the Back to Basics - Infectious Disease Control Initiative. This request funds the remaining two-thirds for the Public Health Laboratories. Two other related increments fund Epidemiology and Public Health Nursing. The Back to Basics Initiative is aimed at reinforcing Alaska's eroding public health system to prevent the spread of infectious disease. Promoting and protecting the public's health is a fundamental function of state government under the Alaska Constitution.

The State of Alaska opened a new Public Health Laboratory in January of 2001. This increased capacity allows the lab to operate more safely, do more tests and do tests of greater complexity. All of these improvements serve Alaskans well. They can get most test results quicker which means treatment can begin earlier. Some tests that could not previously be done are now available to assist physicians in making accurate diagnoses for unusual diseases, and providers can get confirmation tests more readily. But with this increase in service come additional costs. Tuberculosis has re-emerged as a major public health threat in Alaska. As a result of the major outbreaks in the past two years, Centers for Disease Control identified the state during the summer of 2001 as having the highest TB rate in the country. As a result of the increase in this one disease, lab costs have increased substantially. There are more tests being requested, the test kits have increased in cost and the laboratory staff workload has increased. For example, between 1995 and 2000 the cost of the test kits for tuberculosis increased from \$10 to \$50 and the number of tests requested annually increased by several thousand.

There are similar cost increases for many other diseases as well. An example is in the area of sexually transmitted diseases. In 1997 there were approximately 1,984 cases of gonorrhea and chlamydia; in 2000 there was 2,932 or approximately a 50% increase. Additionally, the number of hepatitis tests performed grew from about 7,000 in 1995 to about 22,000 in 2000. These numbers include hepatitis C for which no test was available in 1995. Overall laboratory reagent and labor costs for hepatitis testing alone grew from slightly under \$100,000 in 1995 to several hundred thousand dollars in 2000, with reagent costs making up the majority of the additional cost.

Due to the events of September 11, 2001, and the anthrax bioterrorist events that occurred during October, more and more persons have become cognizant of the role of infectious diseases and the State public health laboratory. This has resulted in a significant increase in the number of tests performed by the laboratory. For example, the number of requests for influenza testing has doubled and the number of requests for testing bacterial agents that cause upper respiratory diseases has increased by 150%. It is surmised that this level of activity will continue indefinitely as the public becomes more aware of the capabilities of our laboratory.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Public Health Laboratories (2252)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

surmised that this level of activity will continue indefinitely as the public becomes more aware of the capabilities of our laboratory. These strains have only exacerbated the fiscal shortfall already experienced by the laboratory as stated above. In order to provide the essential services that are expected by the public in an accurate, timely, cost effective and safe manner, the Division of Public Health requests for the Public Health Laboratory funding for:

Personal Services \$67.0

One additional microbiologist in FY03 to ensure there is full coverage when staff is out ill or on leave, to enhance the ability of the lab to do new tests, and to enable more timely testing of all work being submitted to the lab.

Travel \$3.0

For training or other necessary travel and per diem.

Contractual \$140.0

Increased shipping costs and waste disposal related to increased numbers of specimens.

Supplies \$30.0

Additional test kits, reagents and other supplies are needed to do the lab tests. These costs increase regularly due to rising supply costs and increased numbers of tests being done. Additional test kit supply funding is requested in a separate Homeland Security increment.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Public Health Laboratories (2252)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP
FY2002-2003 Homeland Security													
Bioterrorism - Public Health Lab													
	Inc	608.0	425.0	15.0	30.0	138.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	608.0												

This FY03 increment provides for on-going bioterrorism response capacity. Since the events of September 11, 2001, there has been a marked increase in the demand for services that are both directly and indirectly related to bioterrorism. For example, testing for respiratory viruses has doubled because inhalation anthrax needed to be ruled out when patients came forward with upper respiratory illness. All symptoms of bioterrorism agents initially present themselves as nondescript illness that resemble common disease. These common diseases must be confirmed so that appropriate therapy can be initiated. Failure to differentiate common illness from a bioterrorist event will have dire consequences on the population.

The personal services requested for FY03 is to cover the salary costs of existing microbiologist and laboratory technician positions, both for filled and for currently vacant positions. Without this funding, the lab will not be able to have a full staff available to respond to the demand for lab tests. The current funding level requires numerous positions to be held permanently vacant.

In addition, to maintain the existing staff, the Division of Public Health has converted several Microbiologist and Laboratory Technician positions in Anchorage to a temporary exempt salary schedule. The division has historically had chronic difficulties in recruiting and retaining microbiologists, laboratory technicians and the Chief of the Public Health Laboratory in Anchorage because salaries have not been competitive with those available in private industry. Recent recruitment efforts have failed to produce candidates with adequate clinical experience. The Anchorage Lab had a 47% vacancy rate when the temporary exempt salaries were initiated. The public health emergency involving anthrax required the Anchorage Laboratory to be in operation 24 hours per day. In order to provide adequate coverage of the Public Health Lab, additional staff are required and additional staff cannot be hired without adequate salaries.

This increment also includes \$15.0 for travel for training specific to new and emerging tests to develop staff proficiency. Contractual funds are requested to pay the on-going maintenance costs related to new and very expensive and sophisticated testing equipment that has been installed in the last year. The remainder of the increment is to purchase the additional lab supplies needed to conduct the tests related to bioterrorism threats and concerns.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Public Health Laboratories (2252)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

Computer Network Support for State Medical Examiner & Lab

	Inc	85.0	80.0	0.0	2.0	1.0	2.0	0.0	0.0	0.0	1	0	0
1004 Gen Fund	85.0												

The computer network specialist/program analyst will support the Medical Examiner and Public Health Lab needs involving all issues related to computer hardware/software, network and associated work. This support is essential to ensure adequate communications during a disaster or attack as well as for ongoing public health needs.

This request includes four months personal services for FY02 (\$20.0) and full-year position and support funding in FY03 (\$65.0).

Homeland Security Additional Staff

	Inc	191.3	179.3	0.0	4.0	2.0	6.0	0.0	0.0	0.0	2	0	0
1004 Gen Fund	191.3												

One Microbiologist II, located in Fairbanks, and one Microbiologist II, located in Anchorage, are needed to provide specialized scientific expertise in virology for Anchorage and bacteriology in Fairbanks. Virology is currently done only in Fairbanks and bacteriology only in Anchorage. Having the ability to do some specialized virological testing in Anchorage and some critical bacteriological testing in Fairbanks will ensure uninterrupted essential medical laboratory services in the event air transportation is shut down as it was September 11, 2001, or one of the laboratories is overwhelmed by an influx of specimens from ill persons or environmental specimens due to a terrorist event such as that which occurred due to the October, 2001, anthrax events.

The requested funding is for 2 PFT positions and associated lab testing costs for FY03.

Department of Health and Social Services

BRU: State Health Services (96)

[illegible]

This increment provides for the costs of buying a wide variety of test kits, chemical and biological reagents, microbiological media and other consumables. Test kits include kits for use with the Smart Cycler (tm) real-time polymerase chain reaction automated instrument used to detect the genetic molecules from such bioterrorist-associated germs as anthrax, plague, tularemia and others. Chemical and biological reagents include, but are not limited to, antibodies, DNA and RNA primers, tissue culture cells lines, fluorescent probes, acid/base buffers, and quality control strains. Microbiological media may include items such as SBE, XLD, BHI, whole sheep's blood, yeast extract, vitamins, and antibiotics. Other consumables include such things as petri dishes, swabs, specimen collection devices and kits, and IOTA-approved mailers. All these supplies are rapidly used up when there is a sudden influx of test requests as was illustrated by the events following September 11. Current test supplies funding is inadequate. Therefore, these funds are essential to allow for testing related to bioterrorism.

\$100.0 has been identified as the FY02 need and \$200.0 is for FY03 on-going costs.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Public Health Laboratories (2252)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP
FY2002-2003 Homeland Security Amended													
AMD: Homeland Security Test Kits													
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	100.0												
1004 Gen Fund	-100.0												

Since submittal of the Homeland Security budget request, the Division of Public Health has been notified of Public Health Bioterrorism Preparedness and Response Funds which are available from the Federal Government. This transaction switches a portion of the increment request for Lab Test Kits from General Funds to Federal Funds. Those test kits that are related to bioterrorism are eligible for Federal Funds. That portion of the original increment request that is for lab test kits for Sexually Transmitted Diseases or other testing not related to bioterrorism are still needed, but must remain as a general fund request.

This increment provides for the costs of buying a wide variety of test kits, chemical and biological reagents, microbiological media and other consumables. Test kits include kits for use with the Smart Cycler (tm) real-time polymerase chain reaction automated instrument used to detect the genetic molecules from such bioterrorist-associated germs as anthrax, plague, tularemia and others. Chemical and biological reagents include, but are not limited to, antibodies, DNA and RNA primers, tissue culture cells lines, fluorescent probes, acid/base buffers, and quality control strains. Microbiological media may include items such as SBE, XLD, BHI, whole sheep's blood, yeast extract, vitamins, and antibiotics. Other consumables include such things as petri dishes, swabs, specimen collection devices and kits, and IOTA-approved mailers. All these supplies are rapidly used up when there is a sudden influx of test requests as was illustrated by the events following September 11. Current test supplies funding is inadequate. Therefore, these funds are essential to allow for testing related to bioterrorism.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Public Health Laboratories (2252)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions			
											PFT	PPT	NP	
FY2002-2003 Homeland Security Amended														
AMD: Homeland Security Additional Staff														
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
1002 Fed Rcpts	191.3													
1004 Gen Fund	-191.3													

Since submittal of the Homeland Security budget request, the Division of Public Health has been notified of Public Health Bioterrorism Preparedness and Response Funds which are available from the Federal Government. This transaction switches the increment request from General Funds to Federal Funds.

One Microbiologist II, located in Fairbanks, and one Microbiologist II, located in Anchorage, are needed to provide specialized scientific expertise in virology for Anchorage and bacteriology in Fairbanks. Virology is currently done only in Fairbanks and bacteriology only in Anchorage. Having the ability to do some specialized virological testing in Anchorage and some critical bacteriological testing in Fairbanks will ensure uninterrupted essential medical laboratory services in the event air transportation is shut down as it was September 11, 2001, or one of the laboratories is overwhelmed by an influx of specimens from ill persons or environmental specimens due to a terrorist event such as that which occurred due to the October, 2001, anthrax events.

The requested funding is for 2 PFT positions and associated lab testing costs for FY03.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Public Health Laboratories (2252)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP
FY2002-2003 Homeland Security Amended													
AMD: Computer Network Support for State Medical Examiner & Lab													
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	85.0												
1004 Gen Fund	-85.0												

Since submittal of the Homeland Security budget request, the Division of Public Health has been notified of Public Health Bioterrorism Preparedness and Response Funds which are available from the Federal Government. This transaction switches the increment request from General Funds to Federal Funds.

The computer network specialist/program analyst will support the Medical Examiner and Public Health Lab needs involving all issues related to computer hardware/software, network and associated work. This support is essential to ensure adequate communications during a disaster or attack as well as for ongoing public health needs.

This request includes four months personal services for FY02 (\$20.0) and full-year position and support funding in FY03 (\$65.0).

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Public Health Laboratories (2252)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions			
	Type										PFT	PPT	NP	
FY2002-2003 Homeland Security Amended														
AMD: Bioterrorism - Public Health Lab														
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
1002 Fed Rcpts	608.0													
1004 Gen Fund	-608.0													

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Public Health Laboratories (2252)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

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This FY03 increment provides for on-going bioterrorism response capacity. Since the events of September 11, 2001, there has been a marked increase in the demand for services that are both directly and indirectly related to bioterrorism. For example, testing for respiratory viruses has doubled because inhalation anthrax needed to be ruled out when patients came forward with upper respiratory illness. All symptoms of bioterrorism agents initially present themselves as nondescript illness that resemble common disease. These common diseases must be confirmed so that appropriate therapy can be initiated. Failure to differentiate common illness from a bioterrorist event will have dire consequences on the population.

The personal services requested for FY03 is to cover the salary costs of existing microbiologist and laboratory technician positions, both for filled and for currently vacant positions. Without this funding, the lab will not be able to have a full staff available to respond to the demand for lab tests. The current funding level requires numerous positions to be held permanently vacant.

In addition, to maintain the existing staff, the Division of Public Health has converted several Microbiologist and Laboratory Technician positions in Anchorage to a temporary exempt salary schedule. The division has historically had chronic difficulties in recruiting and retaining microbiologists, laboratory technicians and the Chief of the Public Health Laboratory in Anchorage because salaries have not been competitive with those available in private industry. Recent recruitment efforts have failed to produce candidates with adequate clinical experience. The Anchorage Lab had a 47% vacancy rate when the temporary exempt salaries were initiated. The public health emergency involving anthrax required the Anchorage Laboratory to be in operation 24 hours per day. In order to provide adequate coverage of the Public Health Lab, additional staff are required and additional staff cannot be hired without adequate salaries.

This increment also includes \$15.0 for travel for training specific to new and emerging tests to develop staff proficiency. Contractual funds are requested to pay the on-going maintenance costs related to new and very expensive and sophisticated testing equipment that has been installed in the last year. The remainder of the increment is to purchase the additional lab supplies needed to conduct the tests related to bioterrorism threats and concerns.

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Public Health Laboratories (2252)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions			
											PFT	PPT	NP	
FY2002-2003 Homeland Security Amended														
AMD: Back to Basics for Public Health Laboratory														
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
1002 Fed Rcpts	240.0													
1004 Gen Fund	-240.0													

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Public Health Laboratories (2252)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	Positions		
											PFT	PPT	NP

Since submittal of the Homeland Security budget request, the Division of Public Health has been notified of Public Health Bioterrorism Preparedness and Response Funds which are available from the Federal Government. This transaction switches the increment request from General Funds to Federal Funds.

The Department requests an FY03 increment to fund the remainder of the Back to Basics Initiative for the public health laboratories to ensure the lab has the staff, equipment and contractual funds needed to carry out their infectious disease work.

In FY02 the legislature funded one-third of Governor Knowles' request for the Back to Basics - Infectious Disease Control Initiative. This request funds the remaining two-thirds for the Public Health Laboratories. Two other related increments fund Epidemiology and Public Health Nursing. The Back to Basics Initiative is aimed at reinforcing Alaska's eroding public health system to prevent the spread of infectious disease. Promoting and protecting the public's health is a fundamental function of state government under the Alaska Constitution.

The State of Alaska opened a new Public Health Laboratory in January of 2001. This increased capacity allows the lab to operate more safely, do more tests and do tests of greater complexity. All of these improvements serve Alaskans well. They can get most test results quicker which means treatment can begin earlier. Some tests that could not previously be done are now available to assist physicians in making accurate diagnoses for unusual diseases, and providers can get confirmation tests more readily. But with this increase in service come additional costs. Tuberculosis has re-emerged as a major public health threat in Alaska. As a result of the major outbreaks in the past two years, Centers for Disease Control identified the state during the summer of 2001 as having the highest TB rate in the country. As a result of the increase in this one disease, lab costs have increased substantially. There are more tests being requested, the test kits have increased in cost and the laboratory staff workload has increased. For example, between 1995 and 2000 the cost of the test kits for tuberculosis increased from \$10 to \$50 and the number of tests requested annually increased by several thousand.

There are similar cost increases for many other diseases as well. An example is in the area of sexually transmitted diseases. In 1997 there were approximately 1,984 cases of gonorrhea and chlamydia; in 2000 there was 2,932 or approximately a 50% increase. Additionally, the number of hepatitis tests performed grew from about 7,000 in 1995 to about 22,000 in 2000. These numbers include hepatitis C for which no test was available in 1995. Overall laboratory reagent and labor costs for hepatitis testing alone grew from slightly under \$100,000 in 1995 to several hundred thousand dollars in 2000, with reagent costs making up the majority of the additional cost.

Due to the events of September 11, 2001, and the anthrax bioterrorist events that occurred during October, more and more persons

Change Record Detail With Description

Department of Health and Social Services

Scenario: FY2002-2003 Homeland Security Amended (2511)

Component: Public Health Laboratories (2252)

BRU: State Health Services (96)

Scenario/ Change Record Title	Trans Type	Totals	Personal Services	Travel	Contractual	Supplies	Equipment	Land/ Buildings	Grants Claims	Misc.	PFT	PPT	NP
Due to the events of September 11, 2001, and the anthrax bioterrorist events that occurred during October, more and more persons have become cognizant of the role of infectious diseases and the State public health laboratory. This has resulted in a significant increase in the number of tests performed by the laboratory. For example, the number of requests for influenza testing has doubled and the number of requests for testing bacterial agents that cause upper respiratory diseases has increased by 150%. It is surmised that this level of activity will continue indefinitely as the public becomes more aware of the capabilities of our laboratory. These strains have only exacerbated the fiscal shortfall already experienced by the laboratory as stated above. In order to provide the essential services that are expected by the public in an accurate, timely, cost effective and safe manner, the Division of Public Health requests for the Public Health Laboratory funding for:													
Personal Services \$67.0 One additional microbiologist in FY03 to ensure there is full coverage when staff is out ill or on leave, to enhance the ability of the lab to do new tests, and to enable more timely testing of all work being submitted to the lab.													
Travel \$3.0 For training or other necessary travel and per diem.													
Contractual \$140.0 Increased shipping costs and waste disposal related to increased numbers of specimens.													
Supplies \$30.0 Additional test kits, reagents and other supplies are needed to do the lab tests. These costs increase regularly due to rising supply costs and increased numbers of tests being done. Additional test kit supply funding is requested in a separate Homeland Security increment.													
Totals		1,424.3	751.3	18.0	176.0	471.0	8.0	0.0	0.0	0.0	4	0	0